Small PHA Plan Update Annual Plan for Fiscal Year: 2001

LYNCH HOUSING AUTHORITY

NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES

HUD 50075 OMB Approval No: 2577-0226

PHA Plan Agency Identification

PHA Name: Lynch Housing Authority
PHA Number: NE043
PHA Fiscal Year Beginning: 01/2001
PHA Plan Contact Information: Name: Leo Kalkowski Phone: (402) 569-2910 TDD: Email (if available): housing@threeriver.net
Public Access to Information Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply) Main administrative office of the PHA PHA development management offices Display Locations For PHA Plans and Supporting Documents
The PHA Plans (including attachments) are available for public inspection at: (select all that apply) Main administrative office of the PHA PHA development management offices Main administrative office of the local, county or State government Public library PHA website Other (list below)
PHA Plan Supporting Documents are available for inspection at: (select all that apply) Main business office of the PHA PHA development management offices Other (list below)
PHA Programs Administered:
□ Public Housing and Section 8 □ Section 8 Only □ Public Housing Only

Annual PHA Plan Fiscal Year 2001

[24 CFR Part 903.7]

i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

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	Other (List below, providing each attachment name)			
	<u>ii. Executive Summary</u>			
_	CFR Part 903.7 9 (r)]			
At.	PHA option, provide a brief overview of the information in the Annual Plan			

 Summary of Policy or Program Changes for the Upcoming Year In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of tupdate. 	ŀ
Opuate.	
We are working with HUD Omaha office to resolve issues related to Ceiling and Flat Rents that were determined in last year's Agency Plan Previous Agency Plan and ensure compliance with QHWRA. Since the vast majority of our residents are elderly, we did not adopt a community services policy.	
2. Capital Improvement Needs [24 CFR Part 903.7 9 (g)]	
Exemptions: Section 8 only PHAs are not required to complete this component.	
A. X Yes No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?	
B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$16,999	
C. Yes No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.	
D. Capital Fund Program Grant Submissions (1) Capital Fund Program 5-Year Action Plan	
The Capital Fund Program 5-Year Action Plan is provided as Attachment C	
(2) Capital Fund Program Annual Statement The Capital Fund Program Annual Statement is provided as Attachment B	
3. Demolition and Disposition [24 CFR Part 903.7 9 (h)]	
Applicability: Section 8 only PHAs are not required to complete this section.	
1. Yes No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to	

next component; if "yes", complete one activity description for each development.)

2. Activity Description

Demolition/Disposition Activity Description					
(Not including Activities Associated with HOPE VI or Conversion Activities)					
1a. Development name:					
1b. Development (project) number:					
2. Activity type: Demolition					
Disposition					
3. Application status (select one)					
Approved					
Submitted, pending approval					
Planned application					
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)					
5. Number of units affected:					
6. Coverage of action (select one)					
Part of the development					
Total development					
7. Relocation resources (select all that apply)					
Section 8 for units					
Public housing for units					
Preference for admission to other public housing or section 8					
Other housing for units (describe below)					
8. Timeline for activity:					
a. Actual or projected start date of activity:					
b. Actual or projected start date of relocation activities:					
c. Projected end date of activity:					
4. Voucher Homeownership Program [24 CFR Part 903.7 9 (k)] A. Yes No: Does the PHA plan to administer a Section 8 Homeownership program pur	revent to Section				
A. Yes No: Does the PHA plan to administer a Section 8 Homeownership program pur 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If "N component; if "yes", describe each program using the table below (copy an questions for each program identified.)	No", skip to next				
B. Capacity of the PHA to Administer a Section 8 Homeownership Program The PHA has demonstrated its capacity to administer the program by (select all that apply):					
_	Establishing a minimum homeowner downpayment requirement of at least 3 percent and requiring that at least 1 percent of the downpayment comes from the family's resources				
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or ; req De	quiring that financing for purchase of a home under its section 8 homeownership will be provided, insured guaranteed by the state or Federal government; comply with secondary mortgage market underwriting quirements; or comply with generally accepted private sector underwriting standards emonstrating that it has or will acquire other relevant experience (list PHA experience, or any other ganization to be involved and its experience, below):
5. Safety ar	nd Crime Prevention: PHDEP Plan
[24 CFR Part 903.	· /2
	ion 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan meeting ments prior to receipt of PHDEP funds.
A. Yes	No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
B. What is the	amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? \$
	No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question to next component.
D. Yes	No: The PHDEP Plan is attached at Attachment
6. Other In [24 CFR Part 903.	
A. Resident	Advisory Board (RAB) Recommendations and PHA Response
1. ∑ Yes 	No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2. If yes, the co	omments are Attached at Attachment (File name) ne043f01
3. In what mai	nner did the PHA address those comments? (select all that apply)
	The PHA changed portions of the PHA Plan in response to comments
	A list of these changes is included
	Yes No: below or
	Yes No: at the end of the RAB Comments in Attachment
	Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the at the end of the RAB Comments in
	Attachment

<u>1.</u>	 As presented in Attachment F, the housing authority will conduct a study to determine the options. Actions will be taken according to the results of the study after appropriate consultation with the residents. 							
	Actions will be taken according to the results of the study after appropriate consultation with the residents.							

B. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1.	Consolidated Plan jurisdiction: (provide name here) <u>State of Nebraska Non-Entitlement Area.</u>
2.	The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)
	 □ The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s. □ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan. □ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan. □ Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below) ○ Other: (list below) ○ Since our housing needs assessment has not changed and since the current 5 year State of Nebraska Consolidated Plan has no section on housing needs and specific goals, our compliance for year 2000 is still relevant.
3.	PHA Requests for support from the Consolidated Plan Agency Yes No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:
4.	The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below) The Nebraska Consolidated Plan calls for support of affordable housing in Rural Nebraska. Lynch Housing Authority is definitely one of the sources of affordable housing available in Rural Nebraska.

C. Criteria for Substantial Deviation and Significant Amendments

1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

A. Substantial Deviation from the 5-year Plan:

Substantial deviation from the 5-year plan applies to changes in the agency's core purpose expressed through our mission and goals, strategic goals, and objectives. All changes require approval of the Board of Commissioners.

B. Significant Amendment or Modification to the Annual Plan:

Significant amendments or modifications refer to changes in policies and practices that will impact the quality and variety of services available to the population in need for housing assistance. Examples may include, but are not limited to, changes in preferences, a decision to seek elderly/disabled designation, demolition, a development initiative, or an attempt to begin managing Section 8 vouchers. All changes require approval of the Board of Commissioners.

Attachment A Supporting Documents Available for Review

PHAs are to indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review					
Applicable & On Display	Supporting Document	Related Plan Component			
✓	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans			
	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans			
✓	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans			
1	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs, 2000 Agency Plan			
✓	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources			
✓	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies			
	Any policy governing occupancy of Police Officers in Public Housing check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies			
	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies			
✓	Public housing rent determination policies, including the method for setting public housing flat rents check here if included in the public housing A & O Policy	Annual Plan: Rent Determination			
✓	Schedule of flat rents offered at each public housing development check here if included in the public housing A & O Policy	Annual Plan: Rent Determination			
	Section 8 rent determination (payment standard) policies check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination			

Applicable & On Display	List of Supporting Documents Available for Revi Supporting Document	Related Plan Component	
√	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest	Annual Plan: Operations and	
√	infestation (including cockroach infestation) Results of latest binding Public Housing Assessment System (PHAS) Assessment	Maintenance Annual Plan: Management and	
	Follow-up Plan to Results of the PHAS Resident Satisfaction	Operations Annual Plan:	
•	Survey (if necessary)	Operations and Maintenance and Community Service & Self-Sufficiency	
	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations	
	Any required policies governing any Section 8 special housing types	Annual Plan: Operations and	
	check here if included in Section 8 Administrative Plan	Maintenance	
✓	Public housing grievance procedures check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures	
	Section 8 informal review and hearing procedures check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures	
✓	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs	
✓	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs	
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs	
	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs	
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition	
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing	
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing	
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership	

Applicable	List of Supporting Documents Available for Revi	Related Plan
& On Display	Supporting Document	Component
<u> </u>	Policies governing any Section 8 Homeownership program	Annual Plan:
	(sectionof the Section 8 Administrative Plan)	Homeownership
	Cooperation agreement between the PHA and the TANF agency	Annual Plan:
	and between the PHA and local employment and training service agencies	Community Service & Self-Sufficiency
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other	Annual Plan:
	resident services grant) grant program reports	Community Service & Self-Sufficiency
	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
	PHDEP-related documentation:	Annual Plan: Safety
	 Baseline law enforcement services for public housing developments assisted under the PHDEP plan; Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15); Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; Coordination with other law enforcement efforts; Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan. 	and Crime Prevention
✓	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) check here if included in the public housing A & O Policy	Pet Policy
✓	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

Ann	ual Statement/Performance and Eval	luation Report				
Cap	ital Fund Program and Capital Fund	l Program Replacem	ent Housing Fact	or (CFP/CFPR)	HF) Part 1:	
_	mary		O		,	
PHA Name: Lynch Housing Authority		Grant Type and Number Capital Fund Program: Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: 2001	
	ginal Annual Statement		rs/ Emergencies Revise	ed Annual Statement (ro	evision no:)	
Line No.	formance and Evaluation Report for Period Ending: Summary by Development Account	Final Performance and Evaluation Report Total Estimated Cost		Total Actual Cost		
		Original	Revised	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations	\$1,700				
3	1408 Management Improvements	\$900				
4	1410 Administration	\$850				
5	1411 Audit	\$500				
6	1415 liquidated Damages					
7	1430 Fees and Costs					
8	1440 Site Acquisition					
9	1450 Site Improvement	\$2,000				
10	1460 Dwelling Structures	\$11,049				
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Nondwelling Structures					
13	1475 Nondwelling Equipment					
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1498 Mod Used for Development					
19	1502 Contingency					
20	Amount of Annual Grant: (sum of lines 2-19)	\$16,999				

Ann	ual Statement/Performance and Evalu	ation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1:							
Sum	mary						
PHA N	ame: Lynch Housing Authority	Grant Type and Number			Federal FY of Grant:		
		Capital Fund Program:			2001		
		Capital Fund Program					
		Replacement Housing	Factor Grant No:				
⊠Ori	ginal Annual Statement	Reserve for Disaster	rs/ Emergencies Revi	sed Annual Statement (re	evision no:		
Per	formance and Evaluation Report for Period Ending:	Final Performance and Ev	aluation Report				
Line Summary by Development Account		Total Estimated Cost To		Total A	tal Actual Cost		
No.							
21	Amount of line 20 Related to LBP Activities						
22	Amount of line 20 Related to Section 504 Compliance						
23	Amount of line 20 Related to Security						
24	Amount of line 20 Related to Energy Conservation						
	Measures						

Annual State	ment/Performance and Evalu	ation Report						
Capital Fund	Program and Capital Fund	Program Rep	lacement	Housing	Factor (C	CFP/CFPRH	F)	
_	porting Pages			J	`		,	
PHA Name: Lynch Housing Authority NE043 – 001 & 002		Grant Type and Number Capital Fund Program #: Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: 2001		
Development Number	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed
Name/HA-Wide Activities	2			Original	Revised	Funds Obligated	Funds Expended	Work
	Operation	1406		\$1,700				
	Management Improvement – Computer help & training, and NAHRO conference	1408		\$900				
	Administration	1410		\$850				
	Audit	1411		\$500				
	Site Improvement: pavement, cement, landscaping	1450		\$2,000				
	Dwelling Structure:	1460						
	Renovating roof			\$10,049				
	Carpet and painting			\$1,000				
	Cont. water softener and heater							
	TOTAL			\$16,999				

Annual Statement/Performance and Evaluation Report							
Capital Fund Prog	gram and	Capital 1	Fund Pro	gram Repla	acement Hou	sing Facto	or (CFP/CFPRHF)
Part III: Impleme	entation S	chedule					
PHA Name:		Grant	Type and Nu	mber			Federal FY of Grant:
		_	tal Fund Progr				
		Capi	tal Fund Prog	ram Replacement	Housing Factor #:		
Development Number All Fund			d Obligated All Funds Expended				Reasons for Revised Target Dates
Name/HA-Wide Activities	(Q	uart Ending D	ate)	(Quarter Ending Date)		te)	
	Original	Revised	Actual	Original	Revised	Actual	
		· · · · · · · · · · · · · · · · · · ·					

Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in t PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Ca Program Annual Statement.

□ Original statement			
Development Name			
Number	(or indicate PHA wide)		
NE039	Lynch Housing Authority		
Description of Needed Physical Improvements or Management Improvements		Estimated Cost	Planned Start Date (HA Fiscal Year)
Administration		\$1,700	
Operation		\$900	
Management Impro	vement	\$850	
Pavement, cement,	, landscaping	\$4,049	
Merge four 1 BR units into two 2 BR units (Mat. & Labor)		\$2,000	
Carpeting and paint	ting	\$6,000	
Washer & Dryer		\$1,500	
TOTAL		\$16,999	2002
Administration		\$1,700	
Operation		\$900	
Management Improvement		\$850	
Carpet and painting		\$4,549	
Lawn mower		\$5,000	
TOTAL		\$16,999	2003

Administration	\$1,700	
Operation	\$900	
Management Improvement	\$850	
Audit	\$500	
Carpet and painting	\$2,000	
Install A/C in 10 units	\$11,049	
TOTAL	\$16,999	2004
Administration	\$1,700	
Operation	\$900	
Management Improvement	\$850	
Pavement, cement, landscaping	\$5,000	
Carpet and painting	\$2,000	
Dwelling equipment	\$3,500	
Install A/C in 10 units	\$3,049	
TOTAL	\$16,999	2005
Total estimated cost over next 5 years	\$135,876	

Required Attachment D: Resident Member on the PHA Governing Board

1.	Yes No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)
A.	Name of resident member(s) on the governing board:
В.	How was the resident board member selected: (select one)? Elected Appointed
C.	The term of appointment is (include the date term expires):
2.	A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not? the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board. Other (explain):
B.	Date of next term expiration of a governing board member: 12/7/00
<u>C.</u>	Name and title of appointing official(s) for governing board (indicate appointing official for the next position): Mr. Larry Halstead. Mayor

Required Attachment E: Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

- Alfred McDonald
- Helen Schmitz
- Nola Ducker

Attachment F (Ne043f01): Comments From Advisory Board Advisory Board expressed concern about the parking. Response: The housing authority will conduct a study to determine the more appropriate

solution.